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REPORT OF RECEIPTS AND DISBURSEMENTS

2010 JUN 21 AM 10: 01

FORM 3		SBURSE Authorized Col	Office Use Only		
1. NAME OF COMMITTEE (in	TYPE OR PRI		Example: If typing, type over the lines.	12FE4M5	
The Com	mittee D	o Glect	Stan Cooke	<u>* </u>	
ADDRESS (number and Check if diffithan previous reported. (Advantage)	erent Sly K. M.D.		Braok Loa	AL BE	
, ,	ATION NUMBER V	CITY ▲		STATE A	ZIP CODE
C 0044	4222	3. IS THIS REPORT	NEW (N) OR	(A)	STATE V DISTRICT
(a) Quarterly Re	PORT (Choose One) ports: Quarterly Report (Q1) Quarterly Report (Q2)	(b) 12-Day PR	E-Election Report for the Primary (12P) Convention (12C)	: General (12G) Special (12S)	Runoff (12R)
October 15 Quarterly Report (Q3)		Election o	мм _. /оо	/ Y Y Y	in the State of
January	31 Year-End Report (YE)	(c) 30-Day PC	ST-Election Report for th		
Termination Report (TER)		Election o	General (30G) . n	Runoff (30R)	Special (30S) in the
5. Covering Period	70 07	12009	through \nearrow	2 37 2	609
I certify that I have ex	,	1 n. 1	knowledge and belief it is	true, correct and com	plete.
Signature of Treasure	Linda [1]	Vichelle (oefe	Date DG	14' DOY8
NOTE: Submission of Office Use Only	false, erroneous, or incomp	plete information ma	y subject the person signin	FE	atties of 2 U.S.C. §437g. EC FORM 3 Revised 02/2003)